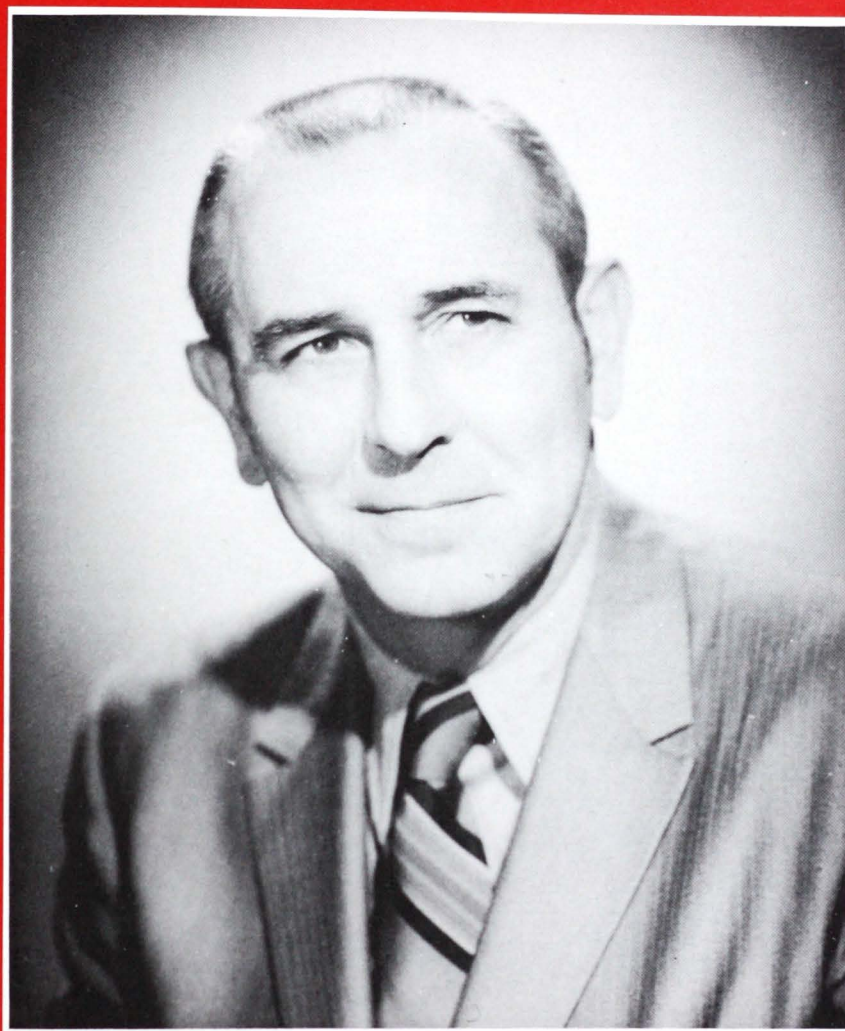


TEXAS OSTEOPATHIC PHYSICIANS JOURNAL

MAY-JUNE 1972



Dr. Robert G. Haman, (D.O.), TOMA President 1972-73

In This Issue:

★ '72 TOMA Fort Worth Convention
Candid Camera

★ United State Senator John Tower Speaks on
Government in Medicine

★ Look the Gift Horse in the Mouth/The D.O.-M.D. Struggle in California
By Alexander Tobin, Attorney for the California D.O.s



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prescribing information appears on next page

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TEXAS OSTEOPATHIC PHYSICIANS JOURNAL

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212 East Ohio Street
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73rd ANNUAL CONVENTION



"the Challenge of Change"

INAUGURAL ADDRESS OF DR. ROBERT G. HAMAN,
1972-73 TOMA PRESIDENT



Senator Tower, Dr. Hall, Mr. Toastmaster, colleagues and guests: It is with great humility that I accept the gavel of this — the highest office of our State Association — the office of president for the coming year.

And I pledge to you that I will work diligently to represent this Association unselfishly and carry out the duties of this office to the best of my ability.

And I certainly want to thank the Association for electing such an outstanding slate of officers and board members to work with this year. I would like to introduce these officers and board members now.

Your president-elect is *Dr. John H. Boyd*.

Your vice president is *Dr. Michael A. Calabrese*.

Your new Board members are *Dr. Billy Sealey, Dr. J. Michael Behrens, Dr. David R. Armbruster, Dr. Ralph C. Merwin and Dr. Ronald H. Owens*.

Those Board members whose terms continue are *Dr. Max Ayer, Dr. Raymond Beck, Dr. John J. Cegelski, Jr., Dr. Dwight Hause, Dr. H. Eugene Brown, Jr., Dr. Richard Leech and Dr. Leland Long*.

The Speaker of the House of Delegates is *Dr. Sam Ganz*, and the Vice Speaker is *Dr. David Norris*.

Dr. Hall has just briefed us on the preceding year and has given much to this Association in leadership and energy. I would like to say thanks again, Dr. Hall, for your tireless efforts this year and a job well done.

Have you looked around lately and wondered what this world is coming to? There have been many changes in our environment in recent years. The *challenge* of change in our environment faces every one today in all walks of life.

Change in itself does not insure progress in all matters, but the world must accept some reasonable changes that are good for the majority.

We must *contribute* to the *creation* of some changes because — if we reject all of them, we may fail to become an essential part of the future. We have all

watched men walk on the moon — maintaining life in that adverse environment — and this is certainly a compliment to the ingenuity of mankind.

The recent creation of techniques for organ transplants from one human to another is only one of the amazing scientific changes of our modern medical times. Yes, there have been many marvelous scientific and technical advances in all fields of human endeavor.

I believe that all men accept changes with great enthusiasm when we are improving ourselves and moving in a *positive direction*.

We all look to the future for many more improvements — such as possible cures for cancer, arthritis, better solutions to our drug abuse problems, and many social and economic problems of this changing world.

We as health care providers have also seen many changes as the population shifts from rural to metropolitan areas. In this computerized society, there are those who would make the physician think that the most important thing is not his training or qualifications but the number he has been assigned by a machine — a number which he can only hope will not be misplaced or its digits transposed.

The problems we treat, the therapies we employ, the length of sickness, the amount of our compensation — are just a few of the numerical statistics that complicate our daily lives.

Other challenges in our changing future are those that are working toward making physicians salaried federal employees.

We have another situation facing us in that some would like to change our degree.

These are just a few of many changes — wanted or unwanted — with which we are challenged in the coming year.

Now let us look further into our future.

(Continued on page 14)

"BE ASHAMED
TO DIE
UNTIL YOU
HAVE EARNED
SOME VICTORY
FOR
MANKIND"

..... Horace Mann

From an address to the 73rd Annual Convention of
The Texas Osteopathic Medical Association
by

MR. ALEXANDER TOBIN

"It is time to look that gift horse in the mouth".

So says Alexander Tobin, attorney for the Osteopathic Physicians and Surgeons of California. He spoke to the Texas Osteopathic Medical Association Convention May 11 about the threat of amalgamation with the American Medical Association. He reviewed the California experience where D.O.s were no longer admitted to practice after 1962.

He said the same thing can happen in Texas if the TOMA members are not vigilant. He said attempts by the Texas Medical Association point to a repeat of the long struggle in California.

Tobin said, "To put their sentiments (favoring the elimination of D.O.s in California), the political forces of the California Medical Association followed a strategy that had been laid out — not in California — but in Chicago, by the American Medical Association."

FIFTH COLUMN INVASION

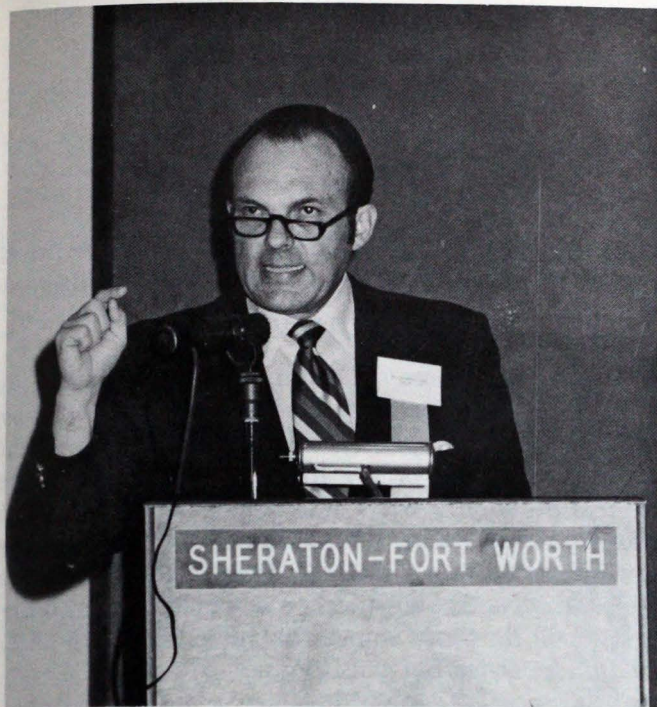
"The strategy called for a 'fifth column' invasion of the California Osteopathic Association, and a gradual infiltration of that association's officialdom. It also called for an eventual merger of the Osteopathic Association with the CMA and the ultimate disbanding of the Osteopathic Association so that only the medical association would survive. All this is to be accompanied by 'appropriate and necessary legislation'.

"The strategy proved so successful, that in May, 1961, the two associations signed an agreement of 'merger'. The agreement called for the following:" Listen carefully. (You may find these terms on TEXAS instant replay.)

1. Both professional organizations were to use their best effort to get the legislature to provide that under certain circumstances the licensed osteopath, if he so desired, could be authorized to use the designation 'M.D.'.

2. The Osteopathic Board was to retain jurisdiction over licensed osteopathy, but if a D.O. became an M.D. the jurisdiction over him would be transferred to the Medical Board.

3. When the number of D.O.s reached 40 or less, the legislature might repeal the Osteopathic Act of 1922....



4. The only osteopathic college in California was to be converted to an allopathic school issuing M.D. degrees.

5. No new or additional physician and surgeon licenses were to be issued by the osteopathic board.

6. The parties to the agreement were to mutually support what became the Initiative Ballot Measure of 1962.

PRESTIGE?

"I have many times wondered what could cause D.O.s to desire so strongly the title M.D. that they would be willing to destroy their profession to obtain it. Perhaps they expected a *great free gift* — or perhaps *prestige*.

"If the converted California D.O.s expected prestige, they have been gravely disappointed. They are looked down upon by those who remained faithful to the profession and who continued to employ the term 'D.O.' (somehow the term 'little m.d.' has come to mean a former D.O. in California). And the M.D.s don't particularly think kindly of, or hold in high esteem, what they call 'turncoats'. I do not recite remarks in derogation of the D.O. who converted to little m.d., but simply to illustrate my point. This is the way it is.

SPECIALTIES NOT HONORED BY AMA

"What the AMA didn't tell the 'gift seekers' was that their specialties would *not* be honored within the American Medical Association, that they would *not* be allowed in any County Medical Association (The California Medical Association created a special state-

wide association for these privileged practitioners — all general practitioners now.)

"They also didn't tell these little m.d.s that their licenses, though issued by the Medical Board, would continue to display their D.O. Board number, so that any 'genuine' M.D. could tell at a glance that this was a turncoat."

"That their prescriptions would carry their D.O. numbers so that the pharmacists knew 'how was who'.

"That their malpractice rates would, by and large be higher than their M.D. brethren. And on and on and on.

"In capsule form, let me tell you that in 1968 we went before the Superior Court of the State of California at the capitol in Sacramento with a petition about two inches thick to establish that the law passed in 1962 was unconstitutional because it deprived the osteopathic physician and surgeon of his *civil rights* — and by civil rights, I'm referring to the type of situation that so commonly occurred in California. Picture this: An M.D. and a D.O. take the same exam at the same time and at the same place, in one of the 40 or so states that have a composite board, like yours here in Texas. Both M.D. and D.O. pass the exam, and start their practice. Then, they both decide to come to California. The M.D. makes application to the Board of Medical Examiners, and is licensed by reciprocity. The D.O. however, can't even get an application from *either* M.D. or D.O. board.

"The (court) petition contained many exhibits. The total effect of which demonstrated the paralleling, equivalence and quality of education, training, and competence of the D.O. and M.D.

" '1962 to 1972'. That's ten years of political medicine's gamesmanship. Ten years of effectively depriving the people of the State of California of osteopathic physicians and surgeons. Ten years of complaining about a critical doctor shortage, by the State, out of one corner of its mouth, while at the same time, telling the physician and surgeon D.O. that he cannot be licensed in California. And, were it not for the hard-fighting, dedicated resident D.O.s in California, the AMA would have won. The AMA thought osteopathy would die in California — but it refuses to die. Its head was bloodied but unbowed. Hopefully, we will begin licensing *new* D.O.s in California later this year. The D.O. Board of Examiners is now accepting applications and California D.O.s are smiling again.

A GUIDEPOST FOR MEDICINE

"Watch out AMA. Watch out you destructive, political, illegitimate sons of Satan. The D.O.s in California are building on the rock of truth. The tower of their healing art will be a guidepost for medicine all over the state — and the nation for that matter.

(Continued on next page)

BE ASHAMED TO DIE...

"But the war is not over. Even though the battle on the California front is almost won. There are some light skirmishes now going on in Texas with respect to osteopathy. Apparently the AMA — through its fellow travelers in the Texas Medical Association — is offering a gift horse to the osteopathic profession and it would appear to me that *'it is time to look that gift horse in the mouth'*.

"On your local scene there appears to be developing a repetition of some of the 'buildup action' which marked....recent history....in California. Here in Texas too, there is now going on a struggle.....between the political forces of the American Medical Association and their quislings within the Texas Medical Association on one side, and the dedicated osteopathic physician and surgeon on the other.

ANTI-PEOPLE BREW

"Almost from the inception of Dr. Still's osteopathic concepts, the AMA and its puppets have stormed the citadel of osteopathy. Their undiminished negative efforts have stalled every opportunity for progress and better health for the American public. Their undercover backroom intrigue and conspiracy continues to go on, as the witches of political medicine distill their *anti-people* brew. Its efforts to monopolize and dictate the methods of treatment and care of the people of this country — even if it requires the crippling and ultimate destruction of the American way of life — goes forward.

"These may seem harsh and bitter words, but they are true and should be heard by the people of this country frequently and loudly. Because the people — even if they don't seem to take the time to find out for themselves — must be protected.

"The American Medical Association's track record was somewhat capsulated in the July 1, 1966 issue of the *New Yorker* magazine under the title "Annals of Legislation". Though the article was written in 1966, nothing has changed except the calendar, and the accumulation of more of the same type of history. The article points up some of the things that the AMA has opposed with its limitless money and power. For example the AMA has opposed — among other things — compulsory vaccination against small pox and compulsory inoculation against diphtheria, the mandatory reporting of tuberculosis cases to public health agencies, the establishment of public venereal disease clinics, and of Red Cross blood banks, federal grants for medical school construction and for scholarships

for medical students, Blue Cross and other private health insurance, and free centers for cancer diagnosis

AMA — THE POLITICAL VOICE

"However, there is some dissension within the AMA and it is occurring because you cannot keep the free mind imprisoned forever. The M.D.s, who by and large are pretty fine guys, are not the ones that I'm aiming at. I am aiming and speaking of their political voice, the AMA. Some of the M.D. free minds are leaving the AMA. They're abandoning that association and going into new associations which they hope will do those things for the M.D. that the AMA *should* be doing but fails to do.

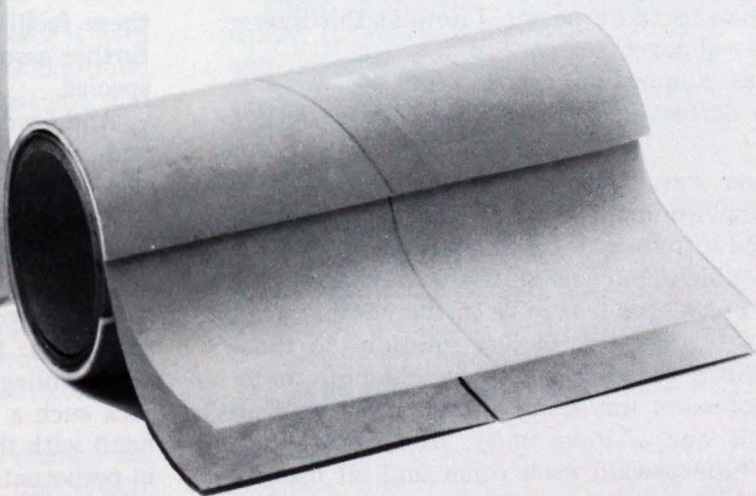
"Another news article quotes Dr. John H. Knowles, who was recommended for the job of Assistant Secretary of Health and Scientific Affairs in HEW by President Nixon, and was *nixed* for that appointment by the AMA. Dr. Knowles says "doctors enjoy the best America has to offer but they have failed miserably in meeting their responsibilities to the public." He goes on to say that "unless the medical profession, as represented by the American Medical Association, meets these responsibilities very soon and changes its stubborn attitude, I fear destructive confrontation with an angry public, and ultimately, the complete socialization of medicine in America". Dr. Knowles goes on to say, "The AMA has resisted every social change in medicine over the past 50 years. It is an incredible record. The situation has degenerated to the point where AMA opposition to any program relating to the nation's health means that *there must be something good in it for the people.*"

WHO WILL BELL THE CAT?

"Okay you say, even if all of this is true, and we are set upon by this marauding animal, who, so to speak, will bell the cat? The answer to that is — *you*, everyone of you, if you are really interested in the survival of your profession, and in the people you have sworn to serve. Failure to do so will bring to every state more Trojan horses, the end result of which, as was true of Troy, is destruction and slavery — not only to the D.O. physician and surgeon but to people of this country.

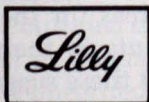
"Osteopathy is a healing balm for the people. You are charged with its preservation. I urge you to carry in your consciousness the words of Horace Mann: 'Be ashamed to die until you have earned some victory for mankind'."▲

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Challenge of Change

No one has an infallible crystal ball that could tell us for certain, but let me assure everyone here tonight that we are on the threshold of the most challenging changes in the history of osteopathic medicine.

How successful we are in the face of these *challenges of change* in our future, the history books will record.

But the real challenge will be our *attitude and dedication to purpose* toward these matters that will help us write this next all important chapter in our future.

One only has to look to our heritage to see the great strides that have been made in the osteopathic profession in Texas — from its very beginning in 1900 — to realize that it took great strength and dedication to accept the challenges of those days — when those who had to shoulder those responsibilities were few in number.

They created the first charter to form our State Association and they developed our composite medical board for licensure. D.O.s were appointed to this Board that has been responsible for examining all Texas physicians — both M.D. and D.O. — for more than sixty years.

It is this kind of strength and fundamental faith in the basic osteopathic concepts that these earlier osteopathic physicians heralded that permit us to be here tonight — with great confidence and courage to face tomorrow with its challenges.

And with this great heritage of our past to use as a foundation for our future, we shall not fail.

I would like to add a personal note at this time — something I will never forget:

There was a question asked while we were in college: *To define life and to make that definition specific.*

The answer was: "The ability of an organism to survive in its environment and to propagate its species."

We of the osteopathic profession have survived many environmental changes of the past and with these many challenges before us in the coming year, I would like to offer — not just solutions to these matters — but a rededication to an old philosophy that this profession was built on and has grown up with: That is one of loyal *unity, friendship* and a *positive attitude* toward each other and all matters concerning this profession. And it can only reflect why we command such support and respect by all who know the osteopathic profession.

With these basic truths that have brought us to this level of success, let's ask ourselves tonight how we can help each other survive in this changing environment and propagate our species in the future.

I have the greatest confidence that we can get this job done — and in good fashion. We have proved that we have such ability and we can take this definition and apply it to the challenge of our future, and now — with many more years of experience — we can continue to contribute to all phases of the health care system of our state.

Today we have D.O.s on the State Board of Health, on the Board of Medical Examiners, county health officers, county coroners, city health officers, members on state commissions in the health care field, the military, veterans hospitals, and many other federal and state agencies.

This varied experience has strengthened our profession to the degree that we will continue to grow, despite many changes.

One of the most pleasant challenges we have this coming year is continuing the development of our fine institution — the Texas College of Osteopathic Medicine — to propagate our species. The many physician and friends responsible for the creation of this new school are to be commended for their great wisdom and hard work, for it has not been an easy road to travel and — starting with just a dream and literally putting it together by bits and pieces — to bring it to where it is today.

And as we were told about the magnificent alliance that was made with the great forward-thinking and progressive educators at North Texas State University, we have taken another giant step forward, and with these facilities available in the basic sciences, we are further assured that we will be able to propagate our species.

And I would like to take this opportunity to solicit and pledge the support of our entire profession to our college for the coming year.

I feel that each District will want to have an even closer alliance with their new college, and, as I visit each of our Districts, I hope that we may work together in participating in a new field of sharing in education: Such as picking a partnership project for your College. Possibly each District could elect to pick such a project so that they could work hand in hand with the College to become — truly — a partner in perpetuation of our school.

This would be according to your own desires: Such as supporting a section of the library, any portion of the basic science or clinical facilities, or possibly creating a rural clinic in areas for the needy in your own district for the students in their clinical years.

The College has accepted these suggestions and will eagerly work with each District to finalize such a

Declaration of Independence...

great partnership project in education.

It is with great enthusiasm that I look forward to visiting your District and discussing these and many other important programs for our future.

Just a few of the matters we will need to deal with in the coming year are:

- National Health Insurance —
- Rising cost in health maintenance —
- Possible loss of the free enterprise systems of health care —
- Possible - loss of the physician-patient relationship —
- Peer review —
- Postdoctoral education —
- The threat of amalgamation —

And our obligation to produce more qualified physicians to assure a greater health maintenance coverage in our State.

I do not intend to relate to all of these matters tonight — only to suggest that we rededicate ourselves to the purpose of continuing our basic fundamental beliefs in our osteopathic philosophy and to maintain a free democratic system of health care in Texas.

We have not stood — and we should not stand — for anything less than a free enterprise system of health care, with each patient being able to seek his own private physicians — D.O. or M.D. — for his personal health needs, without interference from third parties.

Our present provider system may have some flaws — all organizations are subject to improvement — but let's offer our thinking, our years of experience, to improve the system that has worked so well for so many years.

Let us not permit anyone to totally replace it with a program that has no experience or no background that may lead to discontent of both patient and physician, and possibly to create other means of reprisal — such as unions — to solve problems that we have failed to negotiate.

We — the primary health care providers — need to contribute some basic, fundamental intelligence into this new program of our future.

I solicit your allegiance and unity tonight in order to initiate the right and the ability to arbitrate our needs and continue to survive in this new environmental trend.

In regard to those who would like to change our degree, I would like to relate to the fact that within the last few days the TMA House of Delegates has officially opened its doors to the osteopathic profession in this State.

And they have outlined the various steps that a D.O. who is interested in joining them can take to qualify for this transient, unearned little m.d. degree.

I feel it is my responsibility to state here and now what the Texas Osteopathic Medical Association's policy of action is in regard to this matter.

It is the same policy we have had forever, in that we will continue to stand as an independent, free association and maintain with great pride our *earned* D.O. degree.

The TMA certainly had every right to do this in a free democratic country, but as long as we *do* live in a free democratic country, it is also our privilege to continue to preserve our own great osteopathic philosophy by remaining a complete, separate school of medicine forever.

We have said this many times before, that not all of their fine physicians feel this same way. As we heard Dr. Hunt, the Dean of Human Medicine at Michigan State University, in his keynote address on Thursday, in Michigan the two schools of medicine *rea*

remain separate and complete, but they are working together for the good of the people in their state.

I certainly hope that the TMA will not continue to confine or direct its energy and fine talent on a plan of amalgamation and that they will join *us* in our efforts to improve the health care system in *our* state.

If they would consider this, I would like to extend a hand of good faith and friendship to cooperate in every way to combine our total energies, our interests and our experience in preserving the basic fundamentals of this great heritage of a free enterprise system of health care.

These words are new to many of us — but stop and think: If we do not evaluate our common problems and work together as complete separate schools of practice, we all may fail — fail first the people we serve — the public — and them ourselves.

It is our right in a democratic free society — and our professional responsibility to the public we serve and to ourselves — that we mold our own destiny as an integral part of the health manpower pool in Texas.

We have many challenges before us this coming year.

As I said earlier, how successful we are will be determined — first by our strength in unity — then in our dedication to purpose and our positive attitudes toward these matters.

I have great confidence that the osteopathic profession in Texas will join me in friendship this year in our *declaration for independence* — and together we will meet these many challenges of our future with great pride and continue to grow in numbers and strength in order to provide a better health care service to the people of Texas.▲

A7OMA News



[The following was given during the Auxiliary installation luncheon by the new Auxiliary President, Mrs. Bobby G. Smith, when she assumed that office at the annual convention in Fort Worth, May 12.

Our State Auxiliary in Chicago is a big wheel. Each District Auxiliary represents a spoke in this big wheel which makes all involved necessary for the wheel to be effective. We must all work together to keep our wheel rolling.

The Auxiliary to the Texas Osteopathic Medical Association is a great Auxiliary. Let's keep it that way and continue to work together and improve where we see the need.

We have some Districts that are inactive. My goal this year will be to help them work out their problems and become spokes in our wheel. I will need the help of every one and know I can depend on each of you for your support.

So my motto for this year will be: *"Let's keep the wheel for Osteopathy rolling and educate people on our profession."* ▲



Mrs. Bobby G. Smith, President, Auxiliary to TOMA introduces new Auxiliary officers at the annual convention in Fort Worth.

From an address to the TOMA House of Delegates, May 10, by Mrs. Benjamin R. Beall, II, Immediate Past President, Auxiliary to TOMA.

I cannot express to you the enjoyment, the thrills and just the grand time that I have had this past year traveling across this great state—from El Paso to Houston to Amarillo, to Lubbock, to San Antonio, to Dallas, Fort Worth. The mileage is unbelievable.

Those of you who have been in your State President's seat know what I'm referring to. My family has suffered. My husband has suffered, but I have enjoyed every minute of it. I'll pay for it this next year.

I would like to tell you what we have accomplished. We are—first of all and primarily—your auxiliary. We are a service organization for your Association. I think this point needs to be stressed more and more—that we are a service organization to you.

If it were not for TOMA, or the Texas Osteopathic Medical Association, there would be no auxiliary. Without the husbands there would be no wives to have this auxiliary.

We say thanks to you for your profession. We believe in you. We honor you. We love you.

When your wife wants to work in the auxiliary, don't say no. We need her, and you would be amazed how much the profession needs her.

It's a wonderful asset to have a wife who thinks enough of her husband to want to help the profession.

The profession is what provides her with the car that she drives, the house that she lives in, the clothes that she wears and all the little necessities that we take for granted every day. Without the profession it would be impossible, so the only way we can say thank you is by giving our time and our work in promoting the osteopathic profession—not only in Texas but in the United States.

TOMA AUXILIARY OFFICERS 1972-1973

Mrs. Bobby G. Smith, President (Arlington)
Mrs. Carl Mitten, President-Elect (Houston)
Mrs. W. H. Ingram, Vice President (Dallas)
Mrs. John Cegelski, Jr., Secretary (San Antonio)
Mrs. F. S. Wheeler, Treasurer (Fort Worth)
Mrs. Benjamin R. Beall, II,

Immediate Past President (Mineola)

(Turn to page 29)

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- B. These are your subjective and objective findings.
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- D. You check important data for your aide to enter into the medical records jacket.

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- C. Tests and results are here.
- D. Other important personal data, immunizations, hospitalizations and special notes are entered on this page.
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NEW -- Family Jacket Holder (not illustrated) is designed to hold the medical records of up to six members of an individual family in one location.

Disease Cross-Index Card*

A catalog of your chronic disease patients.

This serves as a reference for immediate contact of specific patients. You maintain a card for each of the important chronic disorders, i.e., hypertension, diabetes, chronic respiratory and urinary tract problems, etc. When it is time for flu shots, your aide can pull the cross-index card for bronchitis, emphysema, cardiovascular and other susceptible disorders and ask the patients to stop by the office for their injections. During a slow period in your practice, you can have your aide schedule some chronic patients for their routine physicals. The cross-index can also be used to recall patients for their annual examinations.

You can also employ the cross-index cards for analyzing your practice and for evaluating the status of patients with the same chronic illness.

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fill in card and send it to us.

Gentlemen:
Please provide me with additi
information about:

Disease	Hypertension	Index No.	042	Card No.	1
Patient Name and No.	Birthdate	Date of Dx	Result*	Address and Telephone Number	
Fratt, Robert E.L. 2675	11/1/30	1/14/67	UT	12 Cypress Lane, 345-7865	
Jackson, Thomas J. 1432	2/2/27	1/18/67	D	101 Maine St. Apt. #3 426-0098	
Pender, W. Dorsey 3159	10/1/35	4/27/68	UT	1234 Old Crow Lane 666-7781	
Baker, Anne 3494	3/4/05	6/6/70	UT	14 Merry Lane 427-1107	
Taliaferro, W.F. 2138	6/25/37	6/6/70	R	2678 Winchester Lane 885-2146	
Moyer, Jane C. 1108	10/9/24	7/1/70	UT	12 Montana Circle 441-3678	
Weir, Thomas 2226	4/6/39	7/1/70	UT	190 Lookout 556-8967	
Smith, Amelia 3178	8/10/98	8/8/70	UT	234 Arrowhead St. 437-6206	
Celkous, John J. 2397	8/21/30	8/10/70	UT	771 Crittenden Rd. 334-7864	

- ☐ Health History System
- ☐ Medical Record System
- ☐ Appointment System
- ☐ Telephone System
- ☐ Patient Health Guides

Name _____

Street

City

State

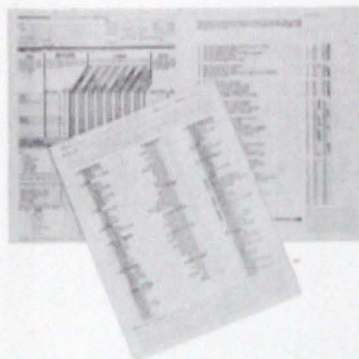
Zip

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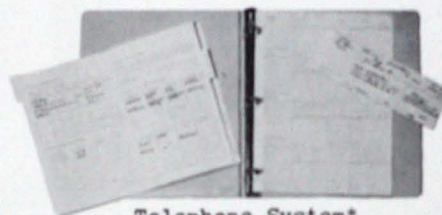
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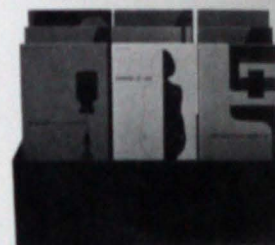
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CAN YOU TOP THIS?

When an annual convention becomes stereotyped and there are no surprises in store for the registrants, registration falls off with only a few attending the lectures and only a few more enjoying the entertainment planned for them.

Fort Worth said, "This time it's going to be different!" and it was. And the advance publicity told TOMA members that they could expect something different.

This year the seminar theme was "The Problems and Prospects of Practice" and it brought the members the business side of their practice, more than the clinical side. And since the business side of the practice of medicine takes up more and more time of the doctor's day, he was very much interested in learning what was in store for him in the months and years immediately ahead.

The lecturers knew of what they were speaking — and the doctors attended the seminars — and listened.

It was said that when Alexander Tobin spoke on "The California Story", he had the largest group of attendants of any lecturers in the history of TOMA conventions. (Text of Mr. Tobin's lecture printed elsewhere in this issue.)

Dr. Joel Alter, program chairman, did a masterful job in choosing all the five speakers for the annual conclave.

Kenneth R. Carrell, D.O., immediate past president of the Iowa Society of Osteopathic Physicians, Mrs. Martha McSteen, Regional Director of HEW, and A. Russell Lokkeberg of the Regional Planning Program Council of Governments, all spoke on the government's increasing role in medicine, with each covering a different segment of it.

J. Gordon Zink, D.O., FFAO, of Canton, Pennsylvania provided the only clinical program of the convention and was featured each of the three days.

The seminar was topped off Saturday morning with a medico-legal panel headed by T. T. McGrath, D.O., and Judge Joe Spurlock of Fort Worth.

Keynote speaker was Andrew D. Hunt, M.D., Dean of Human Medicine of Michigan State University, who explained how both allopathic and osteopathic schools of medicine can peacefully coexist on the same campus.

Although the President's Banquet is in honor of the outgoing president, this year's president's night deviated from the norm when Senator John Tower spoke to an overflow crowd that night on government in business (Several pages of this issue reports the Senator's remarks).

On the fun side, which turned out to be mostly work for the auxiliary members and the TCOM Students Wives helpers, was the Seven Seas tour at Arling-

ton and Fun Night at River Crest Country Club in Fort Worth.

The Auxiliary, under the general chairmanship of Mrs. Tom Turner, did a yeoman's job and were highly praised for their work which included plans for auxiliary functions, as well as those involving the whole convention.

Dr. T. Robert Sharp was named G.P. of the Year by that Society, the award being presented at the President's banquet Friday night.

G. Garland Porter of Lubbock was named to Honorary Life Membership by the House of Delegates at its meeting May 10.

Other main business at that meeting (See House Activities, page 2) was the splitting of District II into two districts, henceforth to be known as District II and District XV. After having been petitioned for redistricting, a committee was appointed by Dr. Hall, which then recommended this action, after holding formal hearings.

Dr. J. Vincent Murphy, AOA president, led the winners of trophies at the annual golf tournament Friday afternoon, Dr. David Beyer was in charge of this function at Shady Oaks Country Club and Marion Laboratories donated the trophies.

The Auxiliary installation luncheon was held at Ridglea Country Club Friday noon, where AAOA President installed Mrs. Bobby Gene Smith of Arlington as President for the coming year, Mrs. Carl Mitten of Houston, President Elect, Mrs. W. H. Ingram of Dallas, Vice President, Mrs. John J. Cegelski, Jr. of San Antonio, Secretary, Mrs. Francis Wheeler of Fort Worth, Treasurer and Mrs. Benjamin R. Beall, II of Mineola, Past President.

Following the luncheon the Auxiliary ladies toured TCOM campus and nearby museums.

Dr. Morris Thompson was a special guest at the college luncheon and was honored on his 25th anniversary as president of KCOM. Other college officers seated with him at the head table included Dean Henry B. Hardt, TCOM, Dr. Richard F. Spavins KCCOM, Dean John Barson, MCOM and Dr. Edward A. Felmlee representing the Oklahoma Osteopathic College, expected to be a reality by fall of 1973. To have three new colleges in a few short years after many years of drouth in the area speaks well for the life of the osteopathic profession.

With such a successful convention under their belts, members in this area are justifiably resting on their laurels and are saying to Houston (the 1973 convention site) "Can you top this?"



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HOUSE APPROVED ACTIONS: MAY 10, 1972

Dr. Dwight H. Hause, Chairman of the Credentials Committee, read names of delegates from each District (except District II) and moved role submitted be official role of voting members of the House of Delegates.

SECONDDED

Dr. Calude H. Lewis moved to amend the Delegate list to include the following members from District II: Drs. James Linton, Richard Leech, Richard W. Hall, Lane Bowden, Michael Lowden, Lee Walker, Robert Rawls, George Naugles, Raymond Beck, Art Wiley and Robert Crawford.

AMENDMENT TO MOTION

SECONDDED

Dr. Tom Whittle moved to amend the amendment to provide for the seating of the following delegates for District II: Drs. Raymond Beck, Carl Everett, F.G. Giles, W. R. Jenkins, Richard Leech, Hugo Ranelle, Robert Rawls, Art Wiley, Donald Cole, Tom Whittle, Roy Risher, A.L. Karback.

AMENDMENT TO AMEND
MOTION

SECONDDED DEFEATED

Dr. Edward J. Yurkon (member of Credentials Committee) moved to amend the Credentials Committee's report that the four doctors whose names appeared on both slates of Delegates presented by District II be seated as voting delegates of that District.

MOTION TO AMEND

SECONDDED DEFEATED

ORIGINAL MOTION CARRIED

Dr. W. L. Ballard moved that the report of the Rules Committee, as read, be accepted.

SECONDDED CARRIED

Dr. David F. Norris moved the adoption of the minutes of the previous meeting of the House of Delegates.

SECONDDED CARRIED

Dr. Claude H. Lewis moved that a copy of the minutes of the previous House of Delegates be sent to each individual member for their perusal before the meeting of the following House of Delegates.

SECONDDED CARRIED

Dr. Kumm moved that a committee be established, under the direction of the (a committee appointed by the President with the advice of the Speaker of the House Board of Trustees and the House, to look into the feasibility of new facilities with some or one of the members being a member of the House) (for the State Office) as well as a possible new location.

SECONDDED CARRIED

Dr. Van Schoick moved that the proposal of the Committee on Constitution, Bylaws and Documents, as recommended to the House by the Board of Trustees, that in Section 1, Line No. 59 of the Constitution be amended to delete the word "annual" be adopted.

SECONDDED

Dr. Yurkon moved that the proposals for amendments as stated above be referred to a Study Committee and reported back to the House.

(Dr. Ganz states motions here as follows:)

It has been moved and seconded that these constitutional amendments referring to an additional meeting of the House of Delegates be referred to a committee for further study and brought back to the next meeting of the House.

(and) It is my opinion that the motion to refer to Committee is to report to the next meeting of the House rather than to refer to Committee of the House to report back to this House.

SECONDDED CARRIED

"It shall be referred and reported back to the House at the next meeting."

Dr. Ralph Merwin moved that the proposal of the Committee on Constitution, Bylaws and Documents that in Constitutional Article II, Section No. 1, Line 12, the word "osteopathic" be deleted as recommended by the Board.

SECONDDED DEFEATED

Dr. Dwight H. Hause moved to adopt the proposal to change Article IX to read "Conventions", and in Section 1, Line 52 in place of the word "Meetings" you insert the word "Conventions".

SECONDDED DEFEATED

Dr. Dwight H. Hause moved that the proposal to delete the word "osteopathic" from Section 1, Line 20, Article II, "Membership" in the Bylaws be defeated.

SECONDDED DEFEATED

Dr. Edward J. Yurkon moved that Article IX, "House of Delegates", Section 9 be deleted in its entirety.

SECONDDED CARRIED

Dr. Ralph Merwin moved that the proposal Article IX under the Bylaws, in place of the word "Meeting" you insert the word "Convention" be deleted.

SECONDDED DEFEATED

Dr. Ralph Merwin moved that the proposal, Article XII, "Committees", Section No. 3, Line No. 482, that the words "Not provided under the Manual of Procedure" be deleted.

SECONDDED CARRIED

Dr. Claude H. Lewis moved that the proposal, Article XIV, Section 1, under the Bylaws, be changed to read, "These Bylaws may be amended at any meeting of the House of Delegates by a two-thirds vote of the accredited Delegates present and voting, provided that the proposed amendment shall have been filed with the Executive Director at least two months before the meeting at which the proposal is to be voted upon. Upon receiving a copy of the proposed amendment, it shall be the duty of the Executive Director to cause it to be printed in the official publication of this Association or to be mailed to the membership at least one month before the meeting."

SECONDDED CARRIED

Dr. David Armbruster moved that the Texas Osteopathic Medical Association oppose all legislative, executive and bureau action to change the degree of its members for their practice rights and support any effort to make available to its members educational opportunities which would improve their ability to deliver health care to the people of Texas. This is a Board action and a Board recommendation.

SECONDDED CARRIED

Dr. Robert Haman moved that the proposal of the Continuing Education Committee that the Association support an effort to make continuing medical education a requirement for relicensure.

SECONDDED CARRIED

Dr. H. Eugene Brown, Jr. moved that the proposal on recommendation of District X of the TOMA the Board of Trustees of the TOMA recommended to the House of Delegates for the TOMA that honorary life membership be granted to Garland Porter.

SECONDDED CARRIED

Dr. John Cegelski moved that the following resolution be adopted by the Texas Osteopathic Medical Association:

BE IT HEREBY RESOLVED that the members and wives of District II of the Texas Osteopathic Medical Association be heartily congratulated for the fine facilities, the arrangement of social and professional activities and the wonderful session shown the attending members and their families; that the exhibitors and sponsors of the several paramedical organizations, we warmly thank for their cooperation in making this a well-rounded

and successful convention and scientific seminar it promises to be; that each member of the TOMA be encouraged to continue to render and when possible augment their support, morally, physically and financially, to the burgeoning Texas College of Osteopathic Medicine.

SECONDED CARRIED

Dr. Suderman moved that the House of Delegates go into an executive session.

SECONDED CARRIED

Dr. David Armbruster recommended to the Board that District II be split into two Districts, in other words, form two Districts out of District II. I recommend that Plan B as printed in front of you be adopted.

SECONDED CARRIED

Dr. H. Eugene Brown, Jr. moved that the proposed amendment to the Bylaws of the Constitution of TOMA, Article IX, House of Delegates, Section 2, Line 382, which reads: "Representation shall be based upon the number of members who are voting members of this Association and who are residing in the territory represented by the District Society", be amended to read "Representation shall be based upon the number of members who are voting members of this Association and voting members of the District Society to which they elect to belong."

SECONDED CARRIED

Dr. Dwight H. Hause moved to refer the Bylaw change to the Committee on Constitution and Bylaws to the next House of Delegates.

SECONDED CARRIED

Dr. T. Eugene Zachary moved that the House of Delegates instruct the Board of Trustees through the President of TOMA to appoint a Committee to establish during this year a Peer Review Manual, also to appoint a Committee to prepare a Relative Value Fee Scale Manual to be presented to the House of Delegates for its approval at its next meeting.

SECONDED

Dr. Dwight H. Hause moved to amend the proposal by deleting of the word "Fee".

SECONDED CARRIED

FIRST MOTION CARRIED

Dr. Dwight H. Hause moved that the Chairman of each District Delegation to the House of Delegates be named at the time the District Secretary certifies its Delegates to the Executive Director of the TOMA as specified in Article IX, Section 3 of the Bylaws, and that this information be contained when the list of Delegates is published.

SECONDED CARRIED

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In Memoriam

DR. H. L. BETZNER

Dr. H. L. Betzner, a 1911 graduate of Kirksville College of Osteopathic Medicine, died April 15 in Dallas. A native of Berlin, Ontario, he practiced general osteopathy in Dallas for 52 years.

Dr. Betzner was a past president of the Texas Osteopathic Medical Association and an Honorary Life Member of TOMA since 1966.

DR. JAMES E. FITE

James E. Fite, D.O., (KCOM'44), died June 2 in a hospital after an extended illness. Dr. Fite, a native Texan, was born in Canyon, Texas February 17, 1921. He was a graduate of West Texas State University in Canyon and interned at Amarillo Osteopathic Hospital in 1945-46.

He was a member of the Board of Directors of the Texas College of Osteopathic Medicine, a former president of the American Academy of Osteopathic Surgeons, Board member of TOMA and practiced osteopathic medicine in Texas all his professional life.

He formerly practiced in Lubbock, Plainview and was active in the Fite and Vinson Osteopathic Clinic in Bonham for many years prior to his passing away.

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CALENDAR OF EVENTS

JUNE 1972

TAOMA Convention

June 9-11

Corpus Christi

*State Board of Medical
Examiners*

(Examination & Reciprocity)

June 12-14

Sheraton Crest

Austin

Athletic Seminar

June 23

KCOM

Kirksville, Missouri

*Psychiatry Postgraduate
Course*

June 24

KCOM

Kirksville, Missouri

77th Annual

AOA Convention

Oct. 8-12, 1972

Bal Harbour, (Miami) Florida

TOMA Post AOA Convention

Caribbean Cruise

October 14-21

Miami, Florida

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Open Letter to Members of TOMA

May 31, 1972

Dear Doctor:

The American Osteopathic Association in 1969 determined that the AMA in the past has consistently adhered to and condoned policies and practices opposed to those of the AOA and that said AMA policies and practices were not in the best interest of the osteopathic profession.

The AOA House of Delegates that year declared officially that any member accepting membership in any form in the American Medical Association or any of its political divisions is acting contrary to the best interests of the American Osteopathic Association and the osteopathic physician and shall be subject to discipline up to and including expulsion.

The Texas Osteopathic Medical Association by action of its House of Delegates in April of 1970 adopted for its policy the same policy stated by the AOA, which bars TOMA members from joining County Medical Societies (M.D.) of the Texas Medical Association (TMA).

It should be pointed out that the TMA is currently trying to mislead D.O.s into thinking that they will get them M.D. degrees if they join the County Medical Society. This is contrary to Texas law and will be vigorously opposed by the TOMA.

County Medical Societies in Texas are also currently telling D.O.s that if they join the County Medical Society (M.D.) they can have privileges on local tax-supported hospital staffs. Under the Texas State Constitution, Article XVI—Section 31, no school of medical practice in Texas shall be given preference and therefore, County Medical Societies have been acting contrary to the Texas Constitution by being a party to preventing D.O.s from taking their rightful place as licensed physicians on the professional staffs of tax-supported hospitals.

The osteopathic profession and the Texas Osteopathic Medical Association can and will continue to make significant contributions to health care in Texas and it stands ready at all times to cooperate with other licensed physicians and the TMA in matters of public health but we are dedicated to remaining an independent, free, voluntary professional association and to keep the degree D.O. inviolate.

Please be advised that if you wish to join the professional staff of a local tax-supported hospital because you have no osteopathic hospital facilities available, it is not necessary legally, morally or otherwise necessary that you join the County Medical Society as a prerequisite. We have an aggressive and successful program to help you gain admittance to the staff of such hospital without joining the County Medical Society and that we will be glad to help you on request.

Faternally yours,



Robert G. Haman, D.O.
TOMA President

D.O. Cannot be Compelled to Join M.D. Society For Hospital Privileges

"Contrary to what the people of Texas have been told recently, an osteopathic physician is not compelled to join a county medical society in order to be considered for staff privileges in a tax-supported city, county or state hospital," Dr. Robert G. Haman (D.O.) of Irving, newly elected president of the Texas Osteopathic Medical Association told the Henderson County Council for Better Government at a meeting held Monday night (May 22) at Seven Points in that County.

According to Dr. Haman, the Constitution of the State of Texas forbids the state legislature to enact any law that gives any school of medical practice preference over any other.

Dr. Haman reiterated the stand of the Texas Osteopathic Medical Association and the American Osteopathic Association that osteopathic medicine will remain a separate and distinct school of medicine, but he said, "What is at stake today is the health care of people of this state and political medicine should have no part in the decision of who renders that care."

He said, "Osteopathic physicians (D.O.s) and allopathic physicians (M.D.s) are licensed by the same State Board of Medical Examiners and are given the same examinations for the issuance of a license to practice medicine in this state."

He said that at this time particularly, all physicians — D.O. and M.D. — must cooperate with each other in order to bring the very best health care to the public, when there is such a shortage of physicians — and primary (or family) physicians in particular.

In a recent action by the Texas Medical Association's House of Delegates, a resolution was passed that would allow osteopathic physicians to join the county societies of the TMA. Dr. Haman said that this would in no way bring better health care to the public — that, in fact, "merging of the two professions into one monopolistic association would probably work to the detriment of the people we are trying to help."

According to Dr. Haman there are many hospitals in Texas with both D.O.s and M.D.s on the staffs and that the cooperation between the two schools of medicine worked well in bringing better medical care to the people.

He said, "The osteopathic profession in Texas extends a hand of friendliness and cooperation to the allopathic profession, but we in our profession worked hard to earn our degree of Doctor of Osteopathy and we do not intend to relinquish it or change it. Exchanging the letters 'M.D.' for those of 'D.O.' would not make us better doctors, nor would it in any way improve the health care picture in Texas."

"We are looking at the total picture. We are not being belligerent, but we believe that if we continue

to remain a complete, separate school of medicine, we're going to insure the public of our contribution to the health manpower pool in the state because our profession — in addition to passing the same examinations for licensure as do M.D.s — has something extra to offer, and we must continue our stand to remain distinct and separate or we will be depriving the public of these additional services that we have to offer — services that other physicians are not qualified to render — services that are important to the people of Texas."

Dr. Haman said that although the osteopathic profession comprises only about ten per cent of medical practitioners in Texas, they take care of the health needs of close to 18 per cent of the population.

He also reminded his listeners that until very recently D.O. schools and hospitals had received almost no tax support; that the profession has been almost entirely self-supporting and self-perpetuating. "On the other hand," he said, "Your tax dollars have paid for the education of almost every M.D. in the state and in the nation. You have subsidized his schools, his training facilities, his hospitals. What he has paid as an individual, out of his own pocket, to become an M.D. is only a drop in the bucket compared to what you have to make health care available to you."

"As I said, until very recently all your health tax dollars have gone into educating M.D.s. The picture is beginning to change in that many states — and the federal government — have seen the great contribution the osteopathic profession is making to the total health care picture, and they are now beginning to allocate some of their tax dollars toward educating D.O.s, as well as, M.D.s."

"There are now seven schools of osteopathic medicine in this country. In another year there will be eight, because the State of Oklahoma in its last legislative session, declared that a state of emergency existed in that state's health manpower pool, and voted to establish a school of osteopathic medicine in Tulsa, allotting state tax money to that purpose."

"Last year it cost the people of Texas about \$1,000 per osteopathic student to help toward the education of more osteopathic family physicians, as compared to something like \$15,000.00 for the education of each M.D. student."

"We in the osteopathic profession wish to have no argument with the majority medical profession. We respect the individual M.D. and want to cooperate with him in the public interest. But we do not want to join his association and we do not want his degree. We are proud of our own!"

TOMA POLICY UNCHANGED

(ATOMA News cont. from page 16)

As was expected, the TMA wasted no time after its House of Delegates passed a resolution inviting D.O.s to join its county medical societies and at once began a campaign to recruit D.O. members.

TOMA President Robert G. Haman, the State Office, and countless others have been asked what the official stand of this Association is in regard to accepting such an invitation.

The official stand of TOMA and AOA is exactly what it has always been — what has been stated over and over again — that any member of TOMA accepting any form of membership in the American Medical Association or any of its POLITICAL DIVISIONS is in a position of divided loyalty and conflicting interests of its POLITICAL DIVISIONS and acting contrary to the best interests of TOMA and shall be subject to discipline up to and including expulsion.

The stand of the recently elected officers of TOMA is the same as it has always been. Nothing has been changed by the TMA resolution.

The executive committee of this Association reiterated in a conference call meeting a few days ago that osteopathic physicians in this State will cooperate in every possible way with allopathic physicians, that they will work — as they have always worked — for the best possible health care for the people of Texas, and that they believe that the people will best receive this through cooperation; but not through amalgamation of the two schools of medicine.

The osteopathic profession in Texas will remain a distinct and separate school of medicine so that the public will not be deprived of the *additional* services D.O.s are qualified to provide.

This Association does not at this time (and hopefully never will) intend to adopt an attitude of belligerence toward the majority medical profession. It will extend a hand of friendship to all who are interested in serving the health care needs of the people of this state, but this Association and its members will not exchange their proud D.O. degree for another that would not in any way increase the health manpower pool, not the quality of care provided.▲

The highlight of my year, other than my official visits to the Districts, was to attend the Texas State Teachers Association annual convention in San Antonio. Your Association gratefully paid for the booth space in the exhibit area, and along with Mrs. John Cegelski from San Antonio, we distributed over 3,000 pamphlets on the Texas Osteopathic Medical Association and the progress the D.O.s have made in the State of Texas.

We were received very warmly; in fact, to the point where you felt you were blown up like a balloon. We had a big head after the first day.

We were the only ones there connected with the health field. It was strictly book exhibitors and us.

Many, many teachers, principals, superintendents, college professors, et cetera, came by and signed up for more literature.

I like to think we educated at least ten per cent of the people we gave literature to. They went home with a pamphlet in their arms.

I felt like I had been to Las Vegas overnight after that first day of shoveling out the material, because I has a sore shoulder.

I want to tell you that you do have a good auxiliary, that we are trying very hard. We ask for your support and your understanding and hope that this next year will be even a better one. I thank you.▲

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* Grade II diabetic retinopathy is revealed by the small hemorrhages and exudates in this photograph of the fundus.

(Continued from page 7)

You know, I have yet to see anything the bureaucracy can do better than the private sector in the American society.

You know its a funny thing that at the same time a lot of the bleeding hearts maintain that if we nationalize health care delivery systems in this country that the American people will be better off and will reduce the costs. Some of these very same poeple voted against exempting health care services from the minimum wage and they themselves are responsible for part of the spiraling costs of health care in this country.

And we're facing the specter of a raised minimum wage again, and if we get it, we'll have to fight like dogs to exempt health care services. And it doesn't make any sense. To begin with, you can look at that kind of legislation in many different ways — not just in respect to health care service, but as it affects the cost too of virtually everything else we do. It has a ripple effect.

If you raise the salary of the marginally employable people in your organization and get them up close to somebody who is semiskilled, someone who is not marginally employable, but very employable, you've got to raise his salary too.

It has a ripple effect in the economy. It's going to drive the cost of everything up. And it's going to result too in the smaller organizations laying off



people because they can no longer justify them on a cost effectiveness basis. And many of these are the marginally employable people who are the first ones that have to go on welfare rolls, and here we go again with the whole spiraling business all over.

I hope as responsible citizens you will think on these things and make your views known to those that represent you in the Congress of the United States.

May I say that we can represent you only so effectively as you keep us informed because I cannot know what your concerns are unless you tell me — and this is true of all my colleagues.

And I hope you will make these things known. ▲

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